PETITIONER'S INFORMATION SHEET TO COURT INVESTIGATOR

Instructions to Petitioner: You must complete this form and send it to Court Administration with the Request for Hearing form. This information will assist the Court Investigator in scheduling and conducting an appointment with the person for whom you have said that a guardian and/or a conservator is needed. If you do not complete this form, we might have to delay the Court hearing on your Petition.

Your Case	Number: PB						
1. IN	INFORMATION ABOUT THE PERSON YOU SAY NEEDS GUARDIAN OR CONSERVATOR:						
Na	Name:		Telephone:				
Pr	esent Address:		Permanent Address:				
OF	OTHER INFORMATION ABOUT THE PERSON WHO IS SAID TO BE INCAPACITATED OR IN NEED OF PROTECTION: A. Location during the daytime:						
B.	rriers:						
C.							
D.	D. Location of the person's spouse, if he or she is military? is alive:						
	FORMATION ABOUT THE ID/OR CONSERVATOR (S		E WHO IS/ARE	ASKING TO B	E THE GUARDIAN (S)		
	Description of:	Peti	tioner		Co-Petitioner		
	Name:						
	Address:						
City, State, Zip Code:							
Home Telephone:							
V	Vork Telephone:						
Social Se	curity No. / State ID No.:						
Race:							
Height:							
	Weight:						
	Color of Hair:						
	Color of Eyes:						
Rel	ationship to Ward:						

4.	INFORMATION ABOUT THE COURT-APPOINTED PHYSICIAN:						
	Name:	Telephone:					
	Address:						
5.	INFORMATION ABOUT PETITIONER'S ATTORNEY:						
	Name:	Telephone:					
	Address:						
6.	INFORMATION ABOUT CO-PETITIONER'S ATTORNEY:						
	Name:	Telephone:					
	Address:						
F 4	Occupt Hose Octor						
For	Court Use Only:						
Date	and Time of Hearing:						
Com	missioner:						